

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	NJ	4-5	5/5
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	PK		0/28/00

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	1	1	101	
51	Original	2	✓	102	
52	Original	3	✓	103	
53	Original	4	✓	104	
		5		105	
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		23		123	
		24		124	
		25		125	
		26	✓	126	
		27	✓	127	
		28		128	
		29		129	
		30		130	
		31		131	
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		33		133	
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		42		142	
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		44		144	
		45		145	
		46		146	
		47		147	
		48		148	
		49		149	
		50	✓	150	

If more than 150 claims or 10 actions  
staple additional sheet here

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